

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

09/485168

## CLAIMS AS FILED - PART I

	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA
OR		
ASIC FEE		
TOTAL CLAIMS	8 minus 20 = *	
DEPENDENT CLAIMS	1 minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT		

If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	* 19	Minus	** 20	=
Independent	* 1	Minus	*** 3	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
Total	*	Minus	**	=
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY  
TYPE ☐

OR OTHER THAN  
SMALL ENTITY

RATE	FEE
	485
X\$ 9=	
X39=	
+130=	
TOTAL	485

RATE	FEE
X\$18=	
X78=	
+260=	
TOTAL	

SMALL ENTITY

OR OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

TO: Ram Processing

FROM: PCT LEGAL OFFICE  
Crystal Plaza 2 7<sup>th</sup> Floor

PLEASE PROCESS THE FOLLOWING CORRECTIONS :

FROM			TO		
APPLICATION #	CODE	FEE	APPLICATION#	CODE	FEE
<u>09/485,165</u>	<u>215</u>	<u>\$55</u>	<u>09/485,168</u>	<u>215</u>	<u>\$55</u>
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

OTHER :

<input checked="" type="checkbox"/>	CHARGE VOUCHER IS ATTACHED TO CHARGE / REFUND ADDITIONAL FEES
<input type="checkbox"/>	OTHER : _____

THE ORIGINAL METHOD OF PAYMENT WAS :

<input checked="" type="checkbox"/>	BY A CHECK
<input type="checkbox"/>	BY A CHARGE TO DEPOSIT ACCOUNT NO. _____